

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/582,545		Filing Date 26 April, 2007			<input type="checkbox"/> To be Mailed				
				Applicant(s) DE FERAUDY ET AL.						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 03/17/2009		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1					51					
2				1				52					
3				1				53					
4				1				54					
5				1				55					
6				1				56					
7				1				57					
8				1				58					
9				1				59					
10				1				60					
11				1				61					
12				1				62					
13				1				63					
14				1				64					
15				1				65					
16				1				66					
17				1				67					
18				1				68					
19				1				69					
20				1				70					
21				1				71					
22				1				72					
23				1				73					
24				1				74					
25				1				75					
26				1				76					
27				2				77					
28				1				78					
29				1				79					
30				1				80					
31				1				81					
32				1				82					
33				1				83					
34				1				84					
35				1				85					
36								86					
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44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
Total Indep			1					Total Indep					
Total Depend				35				Total Depend					
Total Claims			36					Total Claims					

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